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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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VIENNA, VA 22182-3817						(Depositor's name)					
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APPLICATION NO.	FILING DATE			FIRST NAMED INVEN	OR ATTORNEY DOCKET NO.			CONF	CONFIRMATION NO.		
10/522,343	Koji Korechika	a JP25004PCTUS 6308									
TITLE OF INVENTION: INFLATOR BAG FOR OCCUPANT RESTRAINT DEVICE AND METHOD OF MANUFACTURING THE INFLATOR BAG											
APPLN. TYPE	SMALL ENTITY	SMALL ENTITY ISSUE FEE		PUBLICATION FEE I		PREV. PAID ISSU	E FEE	EE TOTAL FEE(S) DUE		DATE DUE	
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EXAMINER			ART UNIT	CLASS-SUBCLASS		]					
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Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				or agents OR, alternatively,  (2) the name of a single firm (having as a member a 2 Law Group						• •	
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is a PLLC listed, no name will be printed.							
. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)											
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.											
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)											
Autoliv Development AB					Vargarda, Sweden						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🗸 Corporation or other private group entity 🚨 Government											
a. The following fee(s) are submitted:  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)											
Issue Fee	sed.	-1 F PTO 2020									
Publication Fee (No small entity discount permitted)  Advance Order - # of Copies 5				Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge overpayment, to Deposit Account Number (enclose an extra copy of this form).							
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  OTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in											
nterest as shown by the rec	cords of the United Sta	tes Pate	nt and Trademark	Office.	_						
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Typed or printed name	Scott M.	<u> Tuli</u>	.no			Registration N	lo	48,317			
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